

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/532224

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1								51					
2			✓					52					
3			✓					53					
4	✓							54					
5			✓					55					
6			✓					56					
7			✓					57					
8	✓							58					
9			✓					59					
10	✓		✓					60					
11			✓					61					
12			✓					62					
13			✓					63					
14	✓							64					
15			✓					65					
16			✓					66					
17			✓					67					
18			✓					68					
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46								96					
47								97					
48								98					
49								99					
50								100					
TOTAL IND.	6												
TOTAL DEP.	11												
TOTAL CLAIMS	17												